

### PATENT APPLICATION

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Kurt ERNE et al.

Group Art Unit: 3662

Application No.:

10/516,730

Examiner:

L. RATCLIFFE

Filed: January 10, 2005

Docket No.: 121940

For:

OPTICAL INCLINOMETER

### **AMENDMENT**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In reply to the June 30, 2006 Office Action, please consider the following:

Amendments to the Claims as reflected in the listing of claims; and

Remarks.



# /AP 15 Rec'd PCT/P**TO 31** JUL **2006**

### **PATENT APPLICATION**

Attorney Docket No.: 121940

AMENDMENT TRANSMITTAL

Group Art Unit: 3662

Examiner: L. RATCLIFFE

## OLIFF & BERRIDGE, PLC Telephone: (703) 836-6400

Facsimile: (703) 836-2787

#### **CUSTOMER NUMBER 25944**

In re the Application of

Kurt ERNE et al.

Application No.: 10/516,730

Filed:

January 10, 2005

For:

OPTICAL INCLINOMETER

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Entitlement to small entity status is hereby asserted.
- Small entity status of this application has been established.

Any additional claim fees have been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	
TOTAL CLAIMS	*30 MINUS	**24	=6	
INDEP CLAIMS	*2 MINUS	***3	=0	
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY				
	RATE	ADD'L FEE	ΩΕ	
	x 25	\$		
	x 100	\$		
	+ 180	\$	Ω	
		\$		

OTHER THAN A				
SMALL ENTITY				
OR	RATE	ADD'L FEE		
	x 50	\$ 300		
	x 200	\$		
ΩR	+ 360	\$		
		\$ 300		

- \* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Check No. 182502 in the amount of \$300.00 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

08/04/2006 GFREY1

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01 FC:1615

300.00 OP

Registration No. 27,075

Timothy S. Smith Registration No. 58,355

JAO:TSS/eks Date: July 31, 2006